

AO 240 (Rev. 10/03)
DELAWARE (Rev. 4/05)UNITED STATES DISTRICT COURT
DISTRICT OF DELAWAREMichael L. Jones 417267

Plaintiff

Thomas Carroll et al

Defendant(s)

APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT

CASE NUMBER:

07-791I, Michael L. Jones

declare that I am the (check appropriate box)

☒

Petitioner/Plaintiff/Movant

☐

Other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury.

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No" go to Question 2)

If "YES" state the place of your incarceration

Delaware Correctional Center

Inmate Identification Number (Required):

417267Are you employed at the institution? NO Do you receive any payment from the institution? NO

Attach a ledger sheet from the institution of your incarceration showing at least the past six months' transactions

2. Are you currently employed? ☐ Yes ☒ No

a. If the answer is "YES" state the amount of your take-home salary or wages and pay period a and give the name and address of your employer.

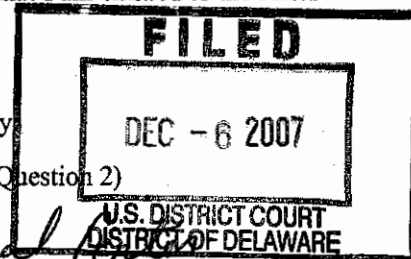
b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

July 16, 2007 \$9.60 a month, Delaware Correctional Center

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|---|-----------------------------|
| a. Business, profession or other self-employment | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Rent payments, interest or dividends | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. Disability or workers compensation payments | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. Gifts or inheritances | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. Any other sources | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

If the answer to any of the above is "YES" describe each source of money and state the amount received AND what you expect you will continue to receive. I was employed by Delaware Correctional Center. I was receiving \$9.60 a month. And I had friends sending me money I don't know when the next time I will receive money.



AO 240 Reverse (Rev. 10/03)
DELAWARE (Rev. 4/05)

4. Do you have any cash or checking or savings accounts? • • Yes • ☒ No
- If "Yes" state the total amount \$ _____
5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property? • • Yes • ☒ No
- If "Yes" describe the property and state its value.
6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, *OR* state *NONE* if applicable. **NONE**

I declare under penalty of perjury that the above information is true and correct.

11-1-07
DATE


SIGNATURE OF APPLICANT

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

DELAWARE CORRECTIONAL CENTER
SUPPORT SERVICES OFFICE
MEMORANDUM

TO: Michael L. Jones SBI#: 417267
 FROM: Mercedes VALLIN
 RE: 6 Months Account Statement
 DATE: 11-15-07

Attached are copies of your inmate account statement for the months of
May 2007 to October 2007.

The following indicates the average daily balances.

<u>MONTH</u>	<u>AVERAGE DAILY BALANCE</u>
<u>MAY</u>	<u>194.64</u>
<u>June</u>	<u>136.82</u>
<u>July</u>	<u>61.72</u>
<u>Aug</u>	<u>12.35</u>
<u>Sept</u>	<u>.00</u>
<u>Oct.</u>	<u>8.08</u>

Average daily balances/6 months: \$ 68.94

Attachments
 CC: File

Mercedes Vallin
11/15/07

Carolanne
11/15/07

Individual Statement From May 2007 to October 2007

Date Printed: 11/15/2007

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SBI	Last Name	First Name	MI	Suffix	Beginning Month Balance:	Pay To	Source Name
00417267	Jones	Michael			\$170.19		
Current Location:	17	Comments:					Ending Month Balance:
							\$2.35

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO# / Ck#	Pay To	Source Name
Wage-1099	5/1/2007	\$9.60	\$0.00	\$0.00	\$179.79	422130		SHU 1/24-2/23/07	
Wage-1099	5/1/2007	\$9.60	\$0.00	\$0.00	\$189.39	422134		SHU 2/24-3/23/07	
Wage-1099	5/1/2007	\$9.60	\$0.00	\$0.00	\$198.99	422138		SHU 3/24-4/23/07	
Canteen	5/8/2007	(\$29.99)	\$0.00	\$0.00	\$169.00	425150			
Mail	5/8/2007	\$30.00	\$0.00	\$0.00	\$199.00	425553	5698567931		L ROBINSON
Mail	5/18/2007	\$30.00	\$0.00	\$0.00	\$229.00	429988	5685545588		T BLACK
Canteen	5/22/2007	(\$30.00)	\$0.00	\$0.00	\$199.00	430742			
Pay-To	5/24/2007	(\$31.90)	\$0.00	\$0.00	\$167.10	432645			ATLANTIC BOOKS
Supplies-MailPosta	5/31/2007	\$0.00	\$0.00	(\$0.39)	\$167.10	435177		5/10/07	
Supplies-MailPosta	5/31/2007	\$0.00	\$0.00	(\$0.39)	\$167.10	435178		5/10/07	
Supplies-MailPosta	6/1/2007	(\$0.39)	\$0.00	\$0.00	\$166.71	437923		5/10/07	
Supplies-MailPosta	6/1/2007	(\$0.39)	\$0.00	\$0.00	\$166.32	437924		5/10/07	
Canteen	6/5/2007	(\$30.00)	\$0.00	\$0.00	\$136.32	438563			
Supplies-MailPosta	6/8/2007	\$0.00	\$0.00	(\$4.60)	\$136.32	440687		5/30/07	ATLANTIC BOOKS
Mail	6/15/2007	\$31.90	\$0.00	\$0.00	\$168.22	443887	19705117		
Supplies-MailPosta	6/15/2007	\$0.00	\$0.00	(\$0.41)	\$168.22	444019		5/31/07	
Supplies-MailPosta	6/15/2007	\$0.00	\$0.00	(\$0.41)	\$168.22	444020		5/31/07	
Supplies-MailPosta	6/15/2007	\$0.00	\$0.00	(\$0.41)	\$168.22	444022		5/31/07	
Canteen	6/19/2007	(\$32.26)	\$0.00	\$0.00	\$135.96	444562			
Pay-To	6/20/2007	(\$10.00)	\$0.00	\$0.00	\$125.96	445829		JUSTICE DENIED	
Supplies-MailPosta	6/21/2007	(\$4.60)	\$0.00	\$0.00	\$121.36	446687		5/30/07	
Supplies-MailPosta	6/21/2007	(\$0.41)	\$0.00	\$0.00	\$120.95	446834		5/31/07	
Supplies-MailPosta	6/21/2007	(\$0.41)	\$0.00	\$0.00	\$120.54	446835		5/31/07	
Supplies-MailPosta	6/21/2007	(\$0.41)	\$0.00	\$0.00	\$120.13	446837		5/31/07	
Supplies-MailPosta	6/25/2007	\$0.00	\$0.00	(\$0.41)	\$120.13	447509		6/17/07	
Pay-To	6/27/2007	(\$15.00)	\$0.00	\$0.00	\$105.13	448960		JUSTICE DENIED	
Canteen	7/3/2007	(\$45.42)	\$0.00	\$0.00	\$59.71	450940			
Mail	7/13/2007	\$25.00	\$0.00	\$0.00	\$84.71	456190	10965816178		K TUCKER
Canteen	7/17/2007	(\$29.97)	\$0.00	\$0.00	\$54.74	456930			
Supplies-MailPosta	7/19/2007	(\$0.41)	\$0.00	\$0.00	\$54.33	459231		6/17/07	
Pay-To	7/25/2007	(\$6.95)	\$0.00	\$0.00	\$47.38	461911		HAMMOND MAP OFF	

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Individual Statement From May 2007 to October 2007

SBI	Last Name	First Name	MI	Suffix	Beginning Month Balance:	\$170.19
00417267	Jones	Michael			Ending Month Balance:	\$2.35
Current Location:	17	Comments:				

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO# / Ck#	Pay To	Source Name
Supplies-MailPosta	7/25/2007	\$0.00	\$0.00	(\$0.41)	\$47.38	462025		7/4/07	
Supplies-MailPosta	7/25/2007	\$0.00	\$0.00	(\$0.41)	\$47.38	462060		7/9/07	
Supplies-MailPosta	7/25/2007	\$0.00	\$0.00	(\$0.41)	\$47.38	462061		7/9/07	
Wage-1099	8/1/2007	\$9.60	\$0.00	\$0.00	\$56.98	463407		BLDG 17	6/24-7/23/0
Canteen	8/1/2007	(\$27.17)	\$0.00	\$0.00	\$29.81	464094			
Supplies-MailPosta	8/10/2007	(\$0.41)	\$0.00	\$0.00	\$29.40	470294		7/4/07	
Supplies-MailPosta	8/10/2007	(\$0.41)	\$0.00	\$0.00	\$28.99	470322		7/9/07	
Supplies-MailPosta	8/10/2007	(\$0.41)	\$0.00	\$0.00	\$28.58	470323		7/9/07	
Canteen	8/14/2007	(\$28.55)	\$0.00	\$0.00	\$0.03	471280			
Supplies-MailPosta	8/17/2007	\$0.00	\$0.00	(\$0.41)	\$0.03	473499		7/15/07	
Supplies-MailPosta	8/17/2007	\$0.00	\$0.00	(\$4.60)	\$0.03	473556		7/16/07	
Supplies-MailPosta	8/17/2007	(\$0.03)	\$0.00	(\$0.38)	\$0.00	473807		7/15/07	
Supplies-MailPosta	8/20/2007	\$0.00	\$0.00	(\$3.50)	\$0.00	474196		8/6/07	
Supplies-MailPosta	8/21/2007	\$0.00	\$0.00	(\$2.67)	\$0.00	475100		7/31/07	
Supplies-MailPosta	8/29/2007	\$0.00	\$0.00	(\$5.30)	\$0.00	479096		8/22/07	
Supplies-MailPosta	8/29/2007	\$0.00	\$0.00	(\$0.41)	\$0.00	479097		8/18/07	
Supplies-MailPosta	8/29/2007	\$0.00	\$0.00	(\$0.41)	\$0.00	479098		8/18/07	
Supplies-MailPosta	8/29/2007	\$0.00	\$0.00	(\$0.41)	\$0.00	479099		8/18/07	
Mail	10/17/2007	\$50.00	\$0.00	\$0.00	\$50.00	501555	20037665895		L ROBINSON
Supplies-MailPosta	10/19/2007	(\$5.30)	\$0.00	\$0.00	\$44.70	503032		8/22/07	
Supplies-MailPosta	10/19/2007	(\$0.41)	\$0.00	\$0.00	\$44.29	503033		8/18/07	
Supplies-MailPosta	10/19/2007	(\$0.41)	\$0.00	\$0.00	\$43.88	503035		8/18/07	
Supplies-MailPosta	10/19/2007	(\$0.41)	\$0.00	\$0.00	\$43.47	503036		8/18/07	
Supplies-MailPosta	10/19/2007	(\$3.50)	\$0.00	\$0.00	\$39.97	503061		8/6/07	
Supplies-MailPosta	10/19/2007	(\$0.38)	\$0.00	\$0.00	\$39.59	503079		7/15/07	
Supplies-MailPosta	10/19/2007	(\$4.60)	\$0.00	\$0.00	\$34.99	503097		7/16/07	
Supplies-MailPosta	10/19/2007	(\$2.67)	\$0.00	\$0.00	\$32.32	503098		7/31/07	
Canteen	10/23/2007	(\$29.97)	\$0.00	\$0.00	\$2.35	503863			

Individual Statement From May 2007 to October 2007

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SBI	Last Name	First Name	MI	Suffix	Beginning Month Balance:	\$170.19
00417267	Jones	Michael			Ending Month Balance:	\$2.35
Current Location:	17	Comments:				

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO# / Ck#	Pay To	Source Name
Ending Month Balance:					\$2.35				

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Legal Hold: \$0.00

Total Amount Currently on Restitution Hold: \$0.00

Total Amount Currently on Other Hold: \$0.00